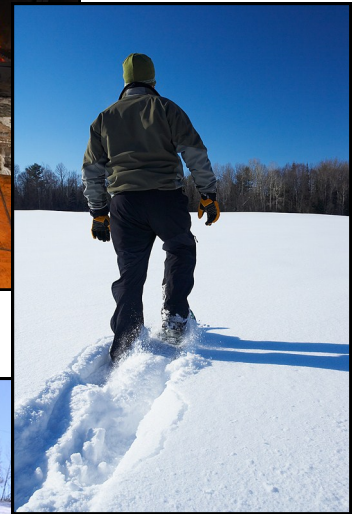


BEHAVIORAL HEALTH

Quarterly news
and updates from
the Idaho
Department of
Health and Welfare



January 2014, Issue 2

Idaho Behavioral Health Crisis Centers

By Jon Meyer
Technical Writer

During this year's session of the Idaho Legislature, the Division of Behavioral Health will propose a new rule and a separate budget request to establish Behavioral Health Crisis Centers around the state.

Some individuals with symptoms of a behavioral health condition are willing to seek help voluntarily but lack the essential resources to get the treatment they need. Operating 24 hours a day, every day of the year, these centers will allow all Idahoans experiencing a behavioral health crisis to get the services they need without going to the

emergency room or being taken to jail.

Behavioral Health Crisis Centers are an essential component of the Idaho Behavioral Health System. If the rule chapter and budget request are approved by the Idaho Legislature, three pilot sites will be established, with one in the north, southwest and southeast portions of the state. Expansion to the rest of the state is planned for subsequent years. The centers will be staffed by three levels of behavioral health professionals: certified peer specialists, nurses and licensed clinicians. Under the proposed rule, individuals will need to meet



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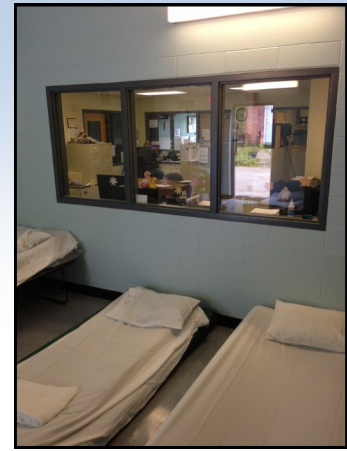
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IDAHO DEPARTMENT OF
HEALTH & WELFARE

several criteria to be admitted:
Be at least 18 years of age; have demonstrated impairment and/or symptom(s) consistent with a DSM-V diagnosable condition; be medically stable; and be in need of frequent observation on an ongoing basis. Estimates indicate one bed will be needed for every 10,000 Idahoans in the community served by each

center. Once established, it is anticipated the centers will utilize local community partnerships to assist in their ongoing operational and service needs. As the pilot sites launch, Division of Behavioral Health staff will continue to evaluate the need, capacity and outcomes to inform future decision making.



Beds at the Billings, Mont. Community Crisis Center

Standards Help Guide Our Practice

By Casey Moyer

Policy Unit Program Manager

Our administrator has spoken to many of you over the past year about the vision and goals of a transformed Behavioral Health system. One of the key components largely absent in Idaho are state-specific practice standards. Presently, there are some standards in rule (specific behavioral health programs) but the system as a whole lacks this consistent component. Standards act as the North star guiding our practice and setting the bar at a level we all

strive to achieve within our various system roles.

We have just completed the public comment period on our first set of standards, known as the Core 18. These are universal standards that apply to any type of behavioral health service provider. Throughout the development process, careful consideration has been paid to: a) evidence-based behavioral health practices; b) widely accepted standards of behavioral health care; c) Idaho Administrative Rule (program specific); d) State contractual requirements;

e) current practice; f) need throughout the state; and g) input from community providers, consumers, and stakeholders. Next, the Division of Behavioral Health's policy unit will continue drafting additional program-specific standards and requesting public comments before finalizing. If you have not signed up online to receive notifications regarding current and future standards activity, we encourage all stakeholders to do so at mentalhealth.idaho.gov or email BHSurvey@dhw.idaho.gov.

Substance Use Program Continues Progress On Several Efforts


By Rosie Andueza

Operations Unit Program Manager

Idaho's Substance Use Disorders (SUD) program is currently involved in several exciting initiatives:

Recovery Coaching: Since March 2013, Idaho has hosted five

Recovery Coach training sessions across the state and has trained 106 Recovery Coaches. Idaho also has 14 of its own Recovery Coach trainers, which allows the state to host its own trainings and continue to grow the pool of Recovery

Coaches. The movement continues to push forward with a training in Boise currently in progress, and future sessions scheduled for Coeur d'Alene (later this month), and Nampa (February 2014). If you are interested in attending one 

of the training sessions, or you would like to see a training session held in your community, please email

RecoveryCoaching@dhw.idaho.gov.

Training of Trainers ~ Recovery

Coaching and Ethics: The Division of Behavioral Health continues to work with the Connecticut Community for Addiction Recovery (CCAR) in providing "Training of



Trainers" opportunities for both Recovery Coaching and Ethics for Recovery Coaches, with the next session slated for March 11 – 14, 2014. If interested, please email RecoveryCoaching@dhw.idaho.gov.

Because these are train-the-trainer sessions, applicants must already be trained in Recovery Coaching and Ethics for Recovery Coaches in order to be trained as trainers.

Recovery Centers: Recovery Centers are meant to provide a meeting place for those in recovery and act as a face for recovery to the community as a whole. A recovery center is a welcoming meeting place where recovery activities take place and others can be counted on to provide support when an individual feels shaky about recovery. The Division of Behavioral Health is working closely with community members in Canyon County to determine local interest and support for a Recovery Center there. A kick-off meeting is scheduled for

Feb. 14 at the Caldwell Department of Health and Welfare office to share the concept and determine next steps. If you are interested in participating, email

husmannj@dhw.idaho.gov. For more information about Recovery Centers and how they are different from Community Crisis Centers, [click here](#).

Rules Change: During this session of the Idaho Legislature, we are proposing a rule change regarding criminal background checks for Substance Use Disorder (SUD) providers. If passed, individuals with certain criminal backgrounds that currently make them ineligible to provide services will be able to request a waiver that will allow them to work with vulnerable populations. If approved, the new rule will take effect July 1, 2014.

Volunteers Needed To Test WITS Upgrades

By Jamie Teeter

**Quality Assurance/Automation
Unit Program Manager**

The Division of Behavioral Health is looking for volunteers to help pilot test updates to the Web Infrastructure for Treatment Services (WITS) system from January through March 2014. In April 2014, all WITS users will begin to utilize the new user interface, which will include a new format, improved functionality and new ease of use features. The

upgrades represent the first step in a plan by WITS vendor FEi to upgrade the electronic health record's framework to newer technology.

With the new features, users will be able to:

- Utilize calendar fields to choose dates, rather than writing them out.
- View WITS in browsers other than Internet Explorer.
- Expand text boxes and read without scrolling.



- Switch between agencies/facilities from any screen in WITS.

To help test the upgrades, the →

WITS Help Desk is looking for volunteers from Substance Use Disorder service providers, Business Psychology Associates, and partner agencies, as well as regional mental health clinicians.

The testing will be done using real client data, meaning that any changes made during testing to the upgraded user interface will be immediately available in the traditional interface. Testers will be

asked to review the system for usability and screen formatting types of issues.

To volunteer to help with testing, email the WITS Help Desk at DBHWITSHD@dhw.idaho.gov.

Region 5 Spotlight: “Our Talents, Our Strengths”

By Scott Rasmussen

Region 5 Program Manager

Mental health problems can affect anyone at any time. It is important that everyone understands how mental illness can affect individuals, families and communities.

On November 7, 2013, members of the Region 5 Behavioral Health team held an open house in Twin Falls for the community, showcasing the artistic talents of many local individuals diagnosed with a mental illness or a severe emotional



disturbance.

This was the 2nd annual showcase

chaired by Eric Call, LCSW, a clinician in Children’s Mental Health. The open house, held at the Herrett Center on the campus of the College of Southern Idaho, was organized to help the communities within Region 5 understand more about mental illness, and to dispel the myth that people with mental illness are incapable or somehow lacking in talent. In addition to original artwork submitted by more than 30 participants, this year’s open house featured vocal performances, piano solos, and the reading of poetry. A video was also shown that captured the successful journey of one participant through the Mental Health Court treatment program. Community members were welcomed and entered into a raffle for door prizes donated by local businesses. In addition to viewing

the displays and listening to performances, attendees had the opportunity to ask questions and gather resource information at a table staffed by regional employees and the Idaho Federation of Families. Activities allowed attendees to try and piece together puzzles or complete word searches while listening to a program simulating auditory hallucinations. Many attended this year’s open house, including state legislators Sen. Jim Patrick, Sen. Lee Heider, and Rep. Lance Clow; a delegate for U.S. Sen. Jim Risch’s office; and passionate members of the community. We are excited to see this event continue to grow and to have the opportunity to educate Idahoans about the effects of mental illness.

Provider Feature: County Embraces Treatment and Recovery Clinic

By Jon Meyer

Technical Writer

For the Twin Falls County Treatment and Recovery Clinic, the support of county leadership has been key to getting substance use disorder

treatment and recovery support services to the people who need them most.

“The county commissioners have really supported these programs for the community. They saw the need

for these services,” Executive Director Jaci Urie said.

For Urie, watching clients succeed who may not otherwise get help can be one of the most rewarding parts of her work. ➡

“We offer these services on a sliding fee scale based on income. So for some people, that means that they don’t pay anything,” Urie said. “The whole purpose is that people in our community get the services they need, and the funding comes secondary.”

In 2003, Urie ran a facility that preceded the Treatment and Recovery Clinic. It was a transitional residential facility for adolescent boys called the Competency Development Center. In 2004, that center added adolescent outpatient substance use disorder services for its residents who met the criteria, and other community members as well.

When county officials assessed the need for SUD treatment in the community again in 2008, the decision was made to close the

residential program and expand outpatient services to include adults. The Twin Falls County Treatment and Recovery Clinic was the result of this reassessment of need and opened the same year in a new location.

In addition to outpatient and intensive outpatient treatment, the clinic offers recovery support services, including transportation, case management, alcohol and drug testing, and life skills.

The clinic employs about 20 staff, and receives its base funding from the county.

“The county has done well fulfilling a need that isn’t always funded,” Urie said.

Urie said that a key to the success of the clinic is the focus on case management and getting clients stable in their environment so they

can focus on treatment. Recovery support services play a big part in that.

“It’s hard for people if they don’t know where they are going to sleep that night or how they’re going to feed their kids, to focus on going to a class, so we really try to focus on the recovery environment,” Urie said.

With the help of the Residential Substance Abuse Treatment grant, the clinic also provides substance use disorder services in gender-specific groups in the county jail. The goal is that when they are released, individuals can complete the outpatient treatment that started in the jail at the clinic.

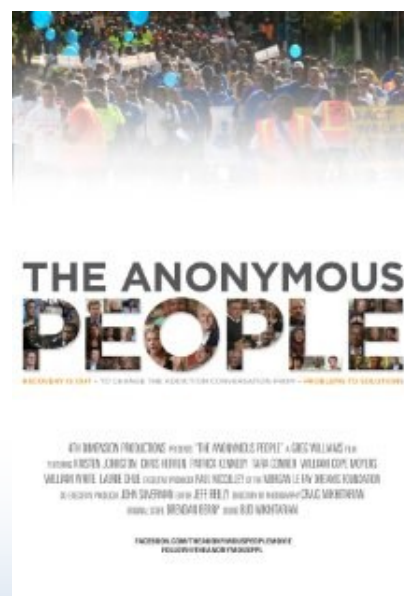
“All the work they’ve done in the jail comes with them and they’re able to finish what they started,” Urie said.

Now Showing: “The Anonymous People”

It is estimated that more than 23 million Americans are in recovery today from an alcohol or substance use disorder. Because of negative public perceptions that can surround addiction and recovery, many of these individuals feel they must hide their status, and they are ashamed to share what they’ve achieved. An inspirational, feature-length documentary, “The Anonymous People” uses first-person interviews to take viewers inside a decades-long movement to raise awareness for this often ignored population. Chronicling

the history of 12-step programs and national drug and addiction policy, this film features the real life experiences of dozens of people – some famous, some not – and puts a face to the struggle that millions of Americans face every day in their fight against addiction.

If you are interested in viewing this documentary, please contact one of the Department of Health and Welfare staff members listed in the Regional Contacts section of this newsletter, on **page 7**.



Words From Our Partners

We've asked our partners to provide periodic communications that will be distributed in our quarterly newsletter. These are the initial articles submitted by Business Psychology Associates and Optum Idaho.

Business Psychology Associates' SUD and RSS Network

Business Psychology Associates (BPA) provides behavioral healthcare solutions that help people improve their lives. As part of our mission BPA establishes statewide provider networks for Substance Use Disorder Treatment and Recovery Support Services. To participate in these networks, providers have to pass a rigorous credentialing process based on national quality standards, which assures that clients who access services are seeing only providers who are able to meet these standards. Currently the network includes 87 providers at 152 sites, which offer the following services:

- Adult Outpatient
- Adolescent Outpatient
- Adult Intensive Outpatient

- Adolescent Intensive Outpatient
- Adult Residential
- Adolescent Residential
- Adult Detox
- Adult Halfway Housing
- Adult Safe & Sober Housing
- Adolescent Safe & Sober Housing
- Adult Basic & Intensive Case Management
- Adolescent Basic & Intensive Case Management
- Adult Life Skills, Adolescent Life Skills
- Adult Alcohol & Drug Testing, Adolescent Alcohol & Drug Testing
- Adult and Adolescent Transportation
- Childcare

The providers in these networks serve clients for the Idaho

Department of Health & Welfare, Idaho Department of Correction, Idaho Supreme Court and Idaho Department of Juvenile Corrections. A current list of BPA contracted providers can be found at <http://www.bpahealth.com/providers/provider-network/substance-use-disorder-provider-network>.

BPA always strives to increase access and availability and therefore we encourage the nomination of high quality providers you would like to see become part of these networks. To nominate a provider, please contact Provider Relations at ProviderRelations@bpahealth.com.

NOTE: BPA is the management services contractor for Idaho's Substance Use Disorder (SUD) treatment and Recovery Support Services (RSS) network.

Recovery and Resiliency: The Foundation of Optum Idaho

At Optum Idaho, the goal is to help people enrolled in the Idaho Behavioral Health Plan access the outpatient mental health and substance use care services that are available to them through public funds, including Medicaid. Optum is dedicated to working in partnership with providers and community stakeholders to implement an accountable, outcome-driven, recovery-centered system.

At the core of the work Optum does is recovery. Recovery is a journey of healing that allows a person with a mental health or substance use issue to live a meaningful life in a community of their choice while striving to achieve their full potential.

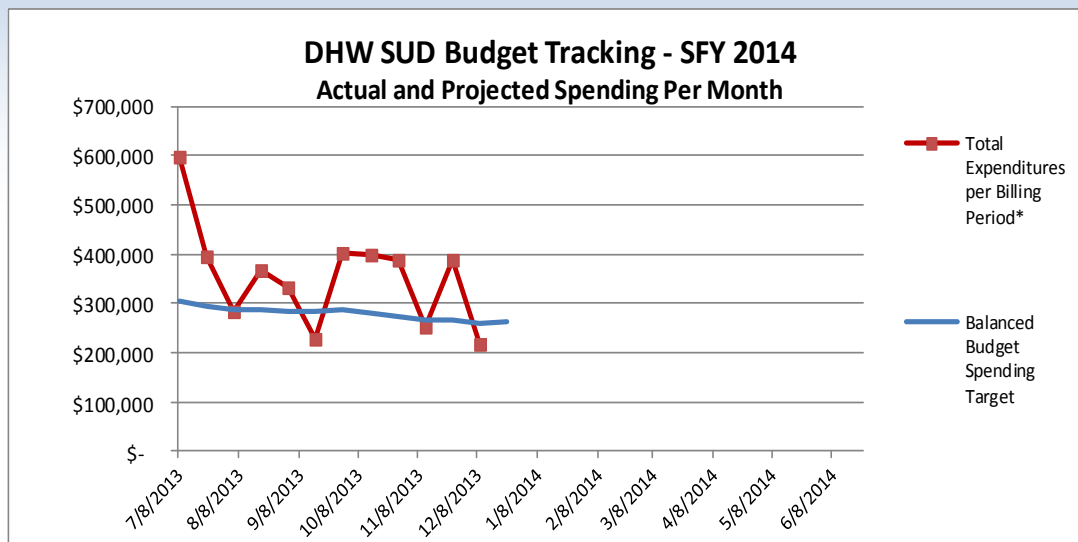
Where the medical model of treatment tends to focus on symptoms, illness, and individual weaknesses, the recovery model

focuses on strengths and personal achievement. Optum's recovery-based model in Idaho has already begun to transform lives.

Optum will be providing recovery and resiliency trainings throughout the state in 2014. To learn more about these trainings or about the recovery-based model, contact Optum Idaho at (855) 202-0983.

NOTE: Optum Idaho is Idaho's Medicaid managed care contractor for Behavioral Health services.

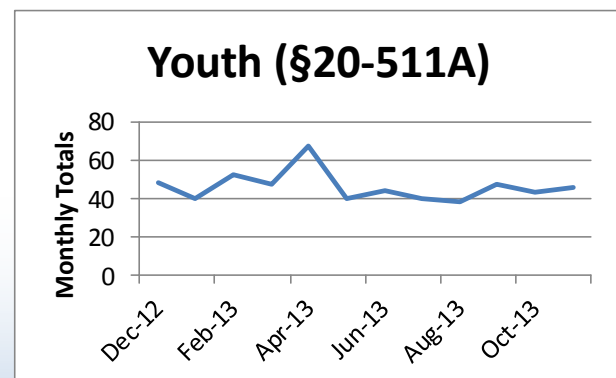
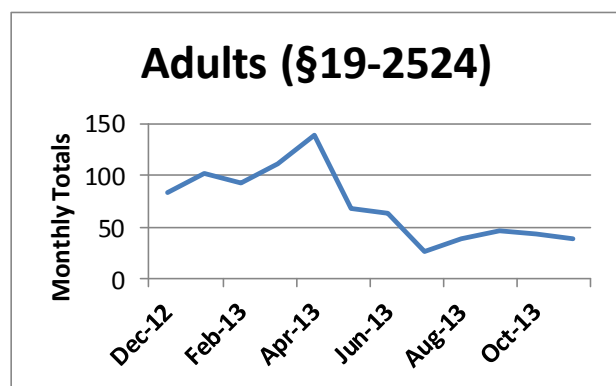
Substance Use Disorder Program Budget Update



This chart shows Substance Use Disorder year-to-date spending. The blue line is the running balanced budget spending target. The total treatment budget for the year is \$7.9 million.

*** Note:** The first invoice of the fiscal year typically appears excessive because it often covers some charges from one or two invoice periods from the previous fiscal year. Subsequent invoices return to normal and only include two weeks of treatment charges.

Court Ordered Mental Health Assessments completed by IDHW



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Feedback

If you would like to learn more about these stories or Behavioral Health, visit mentalhealth.idaho.gov and SUD.dhw.idaho.gov. If you have any suggestions or feedback about this newsletter, email Jon Meyer at meyerj@dhw.idaho.gov.